## S

			· · · · · · · · · · · · · · · · · · ·	
SC	CHEDULE B (FEC Form 3)	Use separate schedule(s)		FOR LINE NUMBER: PAGE <sup>3</sup> OF <sup>16</sup> (check only one)
ITEMIZED DISBURSEMENTS		for each category of the Detailed Summary Page		X   17   18   19a   19b   20a   20b   20c   21
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.				
$\left  \right\rangle$	NAME OF COMMITTEE (In Full) Rocky Chavez for U.S. Senate			
_	Full Name (Last, First, Middle Initial)			
A.	STA .			Date of Disbursement
	Mailing Address 2549 East Bluff Ave #788			07 01 2015
	City State Newport Beach, CA 92660	Zip Code		Amount of Each Disbursement this Period
	Purpose of Disbursement Management Consulting 001			4,250.00
	Candidate Name Category/ Type			
	Office Sought: House Disbursement For Senate Primary President Other (s	General		
_	State: District:			
	Full Name (Last, First, Middle Initial)  The Right Companies Inc.			Date of Disbursement
В.	ine right companies inc.			Maw / Dad / Lagandar
	Mailing Address PO Box 27227			07 01 2015
	City State Zip Code San Diego, CA 92198			Amount of Each Disbursement this Period
	Purpose of Disbursement			1,195.00
	Commissions on Funds Raised		001	Protect Assessment Control of Con
	Candidate Name		Category/ Type	
	Office Sought: House Disbursement For	:		
	Senate Primary	الـــــــا		
	President Other (specify)  State: District:			
_	Full Name (Last, First, Middle Initial)			
C.	The Bight Companies Inc			Date of Disbursement
C.				M M / D D / Y V V V Y
	Mailing Address PO Box 27227			07 01 2015
	City State Zip Code San Diego, CA 92198			Amount of Each Disbursement this Period
	Purpose of Disbursement			1,000.00
	Commission advances 001			
	Candidate Name Category/ Type			
	Office Sought: House Disbursement For Senate Primary	-		
	President Other (s	Ll		
	State: District:	· •		

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....